What patients need to know:

- The HIV test is voluntary and they have the right to choose whether or not to test
- They have the right to ask any questions about HIV and the HIV test before they decide whether or not to test
- What is HIV?

A virus that infects the body and attacks the cells that help fight infection and disease. HIV causes AIDS, a life-threatening disease. HIV lives in blood, semen, vaginal fluid and breast milk. HIV can be passed through unprotected sex or sharing needles/works and from an HIV infected mother to her baby during pregnancy, delivery and breastfeeding.

• What is the HIV test?

The HIV test looks for HIV antibodies. These antibodies are made in the body when a person is infected with HIV. There are a variety of rapid and conventional HIV tests available and specimen sources include an oral specimen, blood, and serum.

• Risks and benefits of testing:

Risks include fear and anxiety while waiting for the result, concern about confidentiality and fear of discrimination. Benefits to knowing ones HIV status include getting early treatment for HIV and taking steps to reduce transmission to partners if HIV positive and if HIV negative, taking steps to stay that way.

- Meaning of positive and negative test results and how they will be communicated to the patient.
- If the patient tests HIV positive, referrals to medical care and other services as needed.

Resources:

Maine HIV, STD and Viral Hepatitis Program 207-287-3747

www.maine.gov/dhhs/boh/ddc/hiv_std_vh.htm

For assistance in giving a positive HIV result: HIV, STD, Viral Hepatitis Program 207-287-3747

For questions interpreting the HIV testing law, contact legal counsel for your organization, or:

Maine Medical Association 207-622-3374

Maine Hospital Association 207-622-4794

To read the Revised Recommendations for HIV Testing of Adults, Adolescents and Pregnant Women in Health Care Settings go to:

www.cdc.gov/mmwr/PDF/rr/rr5514.pdf

Go to:

www.maine.gov/dhhs/boh/ddc/hiv_std_vh.htm for a list of providers offering a variety of services including:

- confidential and anonymous HIV testing
- HIV case management, care and prevention
- AIDS Drug Assistance Program
- Ryan White Programs
- MaineCare benefits for people living with HIV

NEW HIV TestingRecommendations

Health Care Provider Information

In September 2006, the U.S. CDC released Revised Recommendations for HIV Testing of Adults, Adolescents and Pregnant Women in Health Care Settings. The purpose of these recommendations is to make HIV testing a routine part of medical care, both inpatient and outpatient and expand gains made by diagnosing HIV infection among pregnant women. It is recommended that health care providers offer HIV testing to all persons age 13-64 years and to all pregnant women.

To facilitate routine HIV testing in all health care settings, changes were made in the Maine HIV testing law.



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Why test routinely for HIV?

- HIV goes unrecognized. About 25% of adults with HIV in Maine don't know they are infected because they haven't been tested. For adolescents with HIV, it's estimated about 50% don't know. This adds up to about 300-500 Mainers who could benefit from treatment for HIV infection if they were diagnosed.
- About 40% of people with HIV in Maine are diagnosed in the late stages of their disease.
 Often people with HIV infection visit health care settings years before receiving a diagnosis, but are not tested for HIV.
- Individuals tested and treated earlier in their infection tend to have better health and quality of life than those testing late in their disease.
- More than half of new HIV infections are caused by people who are infected but untested and unaware of their infection.
- About 65% of U.S. adults agree that HIV testing should be treated the same as screening for any other disease (Kaiser 2006).
- HIV testing is the gateway for both treatment and prevention.

Key points of the revised Maine HIV testing law:

- Separate written consent to be tested is no longer required.
- Informed consent to be tested is required.
- Providing an opportunity for the patient to decline the test is required
- Pre-test counseling is no longer required
- A pre-test written document is no longer required
- Post-test counseling is required only for positive test results
- Personal contact is required for positive test results
- A separate release of information continues to be required for medical records regarding HIV.

How to obtain informed consent:

Informed consent means permission is given after a proper explanation. A proper explanation for HIV testing should include:

- The nature and purpose of the test
- The risks and benefits of the test
- Other testing options, including the consequences of no test, and
- An opportunity for the patient to ask questions.

Documentation of informed consent may be done with a consent form or through a note in the patient's medical record. The note should describe the patient has an opportunity to agree or decline to test.

According to Maine law, adolescents may seek and give consent for HIV testing without parental consent.

How to conduct post-test counseling for HIV positive results:

For assistance in providing an HIV positive test result contact the Maine Center for Disease Control and Prevention (see page 5 for contact information).

Post-test counseling for positive HIV results is required. The offer of face-to-face counseling must be made and if declined, the provider may use an alternative means of providing post-test counseling.

Personal counseling must include:

- Test results and their reliability and significance;
- Information on good preventive practices and risk reduction plans; and
- Referrals for medical care, support services and legal services, as needed.

An entry in the medical record that summarizes the contents of the discussion should be made.

It is permissible under health information privacy laws to share positive HIV results with another qualified professional from within the provider's health care organization so that the other qualified professional may provide the positive HIV result to the patient without first obtaining an additional consent from the patient.